PTO/SB/82 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
oa collection of information unless it displays a valid OMB control information. Under the Paperwork Reduction Act of 1995, no persons are required to res

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND **CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/802,485
Filing Date	March 9, 2001
First Named Inventor	Kaliski, Burton S.
Art Unit	2135
Examiner Name	Klimach, Paula W.
Attorney Docket Number	1048-006

I hereby revoke all previous powers of attorney given in the above-identified application.								
A Power of Attorney is submitted herewith.								
OR I hereby appoint the practitioners associated with the Customer Number:								
 ✓ Please change the correspondence address for the above-identified application to: ✓ The address associated with Customer Number: 								
OR Firm or								
Individual Name								
Address								
City		State		Zip				
Country								
Telephone		Email						
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
SIGNATURE of Applicant or Assignee of Record								
Signature	hland							
Name Jeffrey J. Dud	quette, Esq.							
Date February 12,	2008	Telephone	(508) 616-2900)				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of 3 forms are submitted.								

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 12/31/2008. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).								
I hereby appoint:								
X Prac	ctitioners assoc	iated with the Customer Number:		47653				
OR								
Prac	ctitioner(s) name	ed below (if more than ten patent	practitioners are to b	e named, then a custo	omer number must be u	sed):		
	Name		Registration Number			Registration Number		
			Number			Number		
-								
<u> </u>								
			in the second					
		to represent the undersigned befo						
		tions assigned <u>only</u> to the undersi- cordance with 37 CFR 3.73(b).	gned according to th	e USPTO assignment	records or assignment	documents		
Please cha	inge the corresp	pondence address for the applicat	tion identified in the a	attached statement un	der 37 CFR 3.73(b) to:			
X			4.5	7653				
T	he address as:	sociated with Customer Number:	*					
OR Firm	n or							
Address	vidual Name							
Address								
City			State		Zip			
Country								
Telephon	е			Email				
				L				
Assignee N	lame and Addr	ess: RSA Security	y Inc.					
174 Middlesex Turnpike								
Bedford, Massachusetts 01730								
Α ςουν οί	f this form. to	ogether with a statement un	der 37 CFR 3.73(I	b) (Form PTO/SB/9	6 or equivalent) is r	equired to be		
filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of								
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record								
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee								
Signature	Christy	Molla			Date			
Name		Christopher Dollase Telephone 781-515-5450			5450			
Title	Senior Counsel & Director of Division Operations, ASSISTMY SECRETARY							

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.